SEC 1972 (6-02)

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

### **ATTENTION**

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

> UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL OMB Number: 3235-0076 Expires: May 31, 2005 Estimated average burden

THOMSON FINANCIAL

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## FORM D

NOTICE OF SALE OF SECURITIES . PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

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Name of Offering ( check if this is an amendment and name has changed, and indicate change.)	1
Series C Preferred Stock and underlying Common Stock issuable upon conversion thereo	f
File Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6)	ULOE
Type of Filing: New Filing Amendment	1AY 19 2003
A. BASIC IDENTIFICATION DATA	
Enter the information requested about the issuer	
Name of Issuer ( check if this is an amendment and name has changed, and indicate change.)	·*
Canesta, Inc.	The state of the s
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
2833 Junction Avenue, Suite 200, San Jose, CA 94134	(408) 435-1400
Address of Principal Business Operations (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
(if different from Executive Offices)	Same as above
Same as above	
Brief Description of Business	
Development of user interface technology for cell phones, PDA's and Internet appliances	
Type of Business Organization	030304
☐ corporation ☐ limited partnership, already formed ☐ othe	(please speed) 03020144
business trust limited partnership, to be formed	·
MonthYear	
Actual or Estimated Date of Incorporation or Organization:    0 4 9 9	Actual Estimated
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State:	
CN for Canada; FN for other foreign jurisdiction)	4

### **GENERAL INSTRUCTIONS**

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

### State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in hose adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law ipriodn, a fe in the Appendix to the notice constitutes a part of this notice and must be completed.

SEC 1972

		A RASIC IDENT	IFICATION DATA		
2. Enter the information re	equested for the follo		IFICATION DATA	to a transfer of the second	•
	•	owing. ier has been organized with	nin the past five years.		
			r direct the vote or dispos	sition of 10% or	more of a class of equity
securities of the iss		wer to vote of dispose, o	t direct the vete of dispes		more or a class or equity
<ul> <li>Each executive off</li> </ul>	icer and director of	corporate issuers and of co	orporate general and manag	ing partners of pa	rtnership issuers; and
		partnership issuers.			• •
Check Box(es) that Apply:	Promoter	☑ Beneficial Owner	☑ Executive Officer	☑ Director	General and/or Managing Partner
Full Name (Last name first,	if individual)		-	·	
Kareemi, Nazim	,				
Business or Residence Addre	ess (Number and St	reet City State Zin Code			
	•	enue, Suite 200, San Jose,			
	Promoter	☐ Beneficial Owner	☑ Executive Officer	[] Diverse	General and/or
Check Box(es) that Apply:	Promotei	△ Denencial Owner	Executive Officer	☐ Director	Managing Partner
Full Name (Last name first,	if individual)		· · · · · · · · · · · · · · · · · · ·	**************************************	38
Rafii, Abbas	ii iiidi vidudi)				
	and Olymphan and Ch	was City State Zin Code	<del> </del>	7	
Business or Residence Address		enue, Suite 200, San Jose,			
			·		
Check Box(es) that Apply:	☐ Promoter	Beneficial Owner	Executive Officer	☑ Director	General and/or Managing Partner
Full Name (Last name first,	if individual)				
Peyret, Patrice					
Business or Residence Addre	ess (Number and Str	reet, City, State, Zip Code)	)		
c/o Canesta, Inc.,	2833 Junction Ave	nue, Suite 200, San Jose,	CA 94134		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	☑ Director	General and/or Managing Partner
Full Name (Last name first,	if individual)				
Thygesen, Allan					
Business or Residence Addre	ess (Number and Str	reet, City, State, Zip Code)	)		
			San Francisco, CA 94111		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	☑ Director	General and/or Managing Partner
Full Name (Last name first, i	if individual)				
Whims, James					
Business or Residence Addre	acc (Number and St	reet City State Zin Code)			
	·	sin Way, Saratoga, CA			
		<del></del>	Executive Officer	⊠ D:ton	Comment and don
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	☑ Director	☐ General and/or Managing Partner
Full Name (Last name first, i	if individual)				
Business or Residence Addre	ess (Number and Sti	reet, City, State, Zip Code)			
	•	Iill Road, Suite 200, Men			
Check Box(es) that	Promoter	☑ Beneficial Owner	☑ Executive Officer	Director	General and/or
Apply:		E Beneficial Owner	El Dicedire Officer		Managing Partner
Full Name (Last name first, i	it individual)				
Bamji, Cyrus					
Business or Residence Addre			•		•
c/o Canesta, Inc.,	2833 Junction Ave	nue, Suite 200, San Jose,	CA 94134		

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

		A. BASIC IDENT	IFICATION DATA		
<ul> <li>Each beneficial ow securities of the issu</li> </ul>	te issuer, if the issuer, and the policy the policy the policy the policy that	uer has been organized with wer to vote or dispose, o corporate issuers and of co			more of a class of equity
Check Box(es) that Apply:	Promoter	Beneficial Owner	☑ Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if Van Meter, Micha	,				
Business or Residence Addres c/o Canesta, Inc., 2	*	reet, City, State, Zip Code) enue, Suite 200, San Jose,			
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☑ Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if Goldberger, James					
Business or Residence Addres c/o Canesta, Inc., 2	•	reet, City, State, Zip Code, enue, Suite 200, San Jose,			
Check Box(es) that Apply:	Promoter	⊠ Beneficial Owner	☑ Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Last name first, if Shivji, Shiraz	individual)				
Business or Residence Addres c/o Canesta, Inc., 2	•	reet, City, State, Zip Code; enue, Suite 200, San Jose,			
Check Box(es) that Apply:	Promoter	☑ Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if Carlyle Venture Page 1997)	,	iliated funds			
Business or Residence Addres c/o The Carlyle Gr	,		) San Francisco, CA 94111		
Check Box(es) that Apply:	Promoter	☑ Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if Venrock Associate		nds			
Business or Residence Addres	,	reet, City, State, Zip Code; Hill Road, Suite 200, Men			
Check Box(es) that Apply:	Promoter	☑ Beneficial Owner	Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Last name first, if KGIF Limited Par					
Business or Residence Addres 10th Floor MSA B		reet, City, State, Zip Code) hi-dong Kangnam-gu, Se			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if	individual)				
Business or Residence Address	ss (Number and St	reet, City, State, Zip Code	)		
	(Use blank	sheet, or copy and use add	itional copies of this sheet,	as necessary.)	

						B. INFOR	RMATION	ABOUT O	FFERING					
1	U о о 41	na icenar	old or de	on the inco	or intend	o noll to	on oggradit	ad investors	in this offer				Yes	No ⊠
1.	nas ti	ie issuer s	solu, or ao	es ine issu		-			in this offer ling under U	-		•••••		نک
2	What	ic the mi	nimum inv	actment +h		-	•	· ·	•			¢	n/a	
2.	wnat	is the mil	minum inv	esument tr	iai WIII De	accepted II	om any ind		••••••••			<u>»</u>		<b></b>
3.	Does	the offeri	ng permit j	joint owne	ership of a	single unit	?	· · · · · · · · · · · · · · · · · · ·	••••••	***************		•••••	Yes ⊠	No
4.	Enter	the info	rmation re	quested f	or each p	erson who	has been	or will be	paid or giv	en, directly	or indirect	ly, any		
	a pers	son to be, list the	listed is an name of th	n associate ne broker	ed person or dealer.	or agent of If more the	a broker o han five (5)	r dealer reg persons to	istered with be listed ar	the SEC an	s in the offer d/or with a d persons of	state or		
			-			ation for th	ne broker or	dealer only	<u>',                                      </u>					
Full		(Last nar	ne first, if	individual	)									
Busi	iness o	r Residen	ce Addres	s (Number	r and Stree	t, City, Sta	ite, Zip Cod	e)						
Nam	ne of A	ssociated	Broker or	Dealer										
							icit Purchas						Паі	1 States
		[AK]			•		[CT]		•					
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Full		(Last nar NONE	ne first, if	individual	)									
Busi	iness o	r Resider	ce Addres	s (Number	r and Stree	et, City, Sta	ite, Zip Cod	e)						
Nam	ne of A	ssociated	Broker or	Dealer	<del></del>	· · · · · · · · · · · · · · · · ·								
State	es in W	Vhich Per	son Listed	Has Solic	ited or Int	ends to Sol	icit Purchas	sers						
													☐ A1	l States
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[ M		[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[ P A	_
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			ne first, if					<u> </u>						-
	ľ	NONE												
Busi	iness o	r Resider	ce Addres	s (Number	r and Stree	et, City, Sta	ite, Zip Cod	e)						
Nam	ne of A	ssociated	Broker or	Dealer										
State	es in W	Vhich Per	son Listed	Has Solio	ited or Int	ends to Sal	licit Purchas	ers						
												•••••	☐ Al	l States
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	T]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[ P A	
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(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

	C. OFFERING FRICE, NUMBER OF INVESTORS, EAFENGES AND USE OF	TROCEEDS				
l.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box $\square$ and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.					
	Type of Security	Aggregate Offering Pric	e	Ar	nount Alrea Sold	ady
	Debt	\$ -0-		\$	-0-	
	Equity	\$17,369,987.	50	\$7,	510,000.15	
	☑ Common ☑ Preferred	<del></del>		·		
	Convertible Securities (including warrants)	\$ -0-		\$	-0-	
	Partnership Interests	\$ -0-		\$	-0-	
	Other (Specify)	\$ -0-		\$	-0-	
	Total	\$17,369,987.	50	\$ <del>7</del> ,	510,000.15	
	Answer also in Appendix, Column 3, if filing under ULOE.					
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	Number			aggregate lar Amount	
		Investors			Purchases	
	Accredited Investors	9		\$7,5	10,000.15	
	Non-accredited Investors	n/a	-	\$	n/a	
	Total (for filings under Rule 504 only)	n/a	-	\$	n/a	
	Answer also in Appendix, Column 4, if filing under ULOE.		-			_
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.					
	Type of offering	Type of Security		Dol	lar Amount Sold	•
	Rule 505	n/a		\$	n/a	
	Regulation A	n/a		\$	n/a	
	Rule 504	n/a	_	\$	n/a	
	Total	n/a	_	\$	n/a	
١.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.					
	Transfer Agent's Fees			\$	-0-	
	Printing and Engraving Costs			s	-0-	
	Legal Fees		×	\$10	0,000.00	
	Accounting Fees			\$	-0-	
	Engineering Fees			\$	-0-	
	Sales Commissions (specify finder's fees separately)			\$	-0-	
	Other Expenses (identify)			<u> </u>	-0-	
	Total		⊠	\$10	0,000.00	

	b. Enter the difference between the aggregation I and total expenses furnished in reladjusted gross proceeds to the issuer."	ate offering price given in response to Part C sponse to Part C - Question 4.a. This differe	nce is the		\$ <u>7,</u>	410,000.15
5.	Indicate below the amount of the adjusted used for each of the purposes shown. If the estimate and check the box to the left of the the adjusted gross proceeds to the issuer set f	e amount for any purpose is not known, fuestimate. The total of the payments listed me	rnish an Ist equal			
				Payments to Officers, Directors, & Affiliates	Ì	Payments To Others
	Salaries and fees		□ \$	-0-	□ \$_	-0-
	Purchase of real estate			-0-		-0-
	Purchase, rental or leasing and installation	on of machinery and equipment	□ \$_	-0-	□ \$	-0-
	Construction or leasing of plant building	gs and facilities	□ \$	-0-	□ \$	-0-
	Acquisition of other business (including offering that may be used in exchange for issuer pursuant to a merger)	the value of securities involved in this or the assets or securities of another	□ \$	-0-	□ \$	-0-
	Repayment of indebtedness		s	-0-	□ s	-0-
	Working capital		□ s	-0-	⊠ \$7	,410,000.15
	Other (specify):					
			□ s	-0	□ s_	-0-
	-		□ \$	-0-	⊠ \$7	,410,000.15
	Total Payments Listed (column totals ad	ded)			⊠ \$ <u>7</u>	,410,000.15
		D. FEDERAL SIGNATURE				
ollo	issuer has duly caused this notice to be sig wing signature constitutes an undertaking by aff, the information furnished by the issuer to	the issuer to furnish to the U.S. Securities ar	d Exchang	e Commission.	d under upon wr	Rule 505, th
ssu	er (Print or Type)	Signature	Da	ate		
Can	esta, Inc.	Malea	М	ay <u>12</u> , 2003		
Nam	e or Signer (Print or Type)	Title of Signer (Print or Type)				
Vazi	m Kareemi	President				

# ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)